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Last Updated: 03/09/2022

National Provider Identifier (NPI) Compliance Begins May 23, 2008

DMAS has adopted the NPI as the standard for identifying <u>all</u> healthcare providers on <u>all</u> transactions (Automated Response System, Claims, Medicare Crossovers and Prior Authorizations), including paper claim submissions. DMAS assigns Atypical Providers (Non-healthcare as defined by CMS), who are not eligible for an NPI, a ten-digit Atypical Provider Identifier (API) to use in lieu of an NPI.

NPI COMPLIANCE BEGINS MAY 23, 2008

Effective May 23, 2008, DMAS will process only claims having an NPI or API. Legacy (9-digit) Medicaid Provider Identification Numbers (PINs) will no longer be used to adjudicate claims, and therefore should not be placed on your claims submitted to DMAS.

Claims received after May 22, 2008 with only a Legacy Medicaid PIN will be denied for either Edit Reason 1364, "Service NPI Not Found on Claim" or Edit Reason 1365, "Billing NPI not Found on Claim."

SHARING YOUR NPI

Providers must obtain their NPI from the National Plan and Provider Enumeration System (NPPES) (https://nppes.cms.hhs.gov).

Sharing the NPI with DMAS and obtaining the NPI from NPPES are two separate and distinct actions. As a healthcare provider, you should have already obtained an NPI from NPPES and enrolled your NPI with DMAS by responding to the NPI Re-Enrollment



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Packet or NPI Group Practice Enrollment Packet DMAS previously mailed to you.

Providers who have not shared their NPI with DMAS should do so immediately. Your complete NPI Re-Enrollment Packet must be received by **May 5, 2008**, to ensure it is processed prior to the May

23, 2008, cutoff date. To ensure there is no disruption to participation or cash flow, you are strongly encouraged to complete their NPI Re-Enrollment Packet and send it to the First Health Provider Enrollment Unit (PEU) immediately. For a replacement copy of your NPI Re-Enrollment Packet, contact the First Health PEU at (888) 829-5373 (toll free).

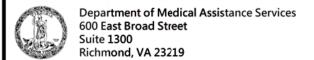
If you have not shared your NPI with DMAS, your claims will be denied.

If you are a Group Practice, and not all of your participating providers have obtained their NPI or signed their Reassignment of Benefits Form, you are strongly encouraged to send in what you have completed. This will allow DMAS to enroll your group, including those providers that have submitted complete information, so that you are ready to transact business for those providers. You can always add (or delete) additional provider NPIs, as necessary.

BILLING INFORMATION

Effective May 23, 2008, claims (UB-04, 837I, CMS-1500, 837P and the DMAS 30/31) will no longer require the submission of Legacy Medicaid PINs. The claims-form locators will require either the NPI or the API and will no longer be processed using a Legacy Medicaid PIN. Please refer to Attachment A and B for a quick reference guide to specific NPI/API locators.

DMAS is requiring taxonomy codes to be included on the claim in some



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situations. Previously, DMAS was able to assign a unique Legacy Medicaid PIN to a provider for each type of service provided (for example, home health and personal care, pharmacy and durable medical equipment/supplies). When a provider obtained one NPI to use in place of two or more Legacy Medicaid PINs, it became necessary to include a taxonomy code on the claim submission that corresponds to the type of service billed in order for the claim to pay and process correctly. If you are a provider who was affected by this change, more information can be found at:

http://www.dmas.virginia.gov/downloads/pdfs/npi DMAS TaxonomyCodeSummary.pdf

DMAS is also requiring the use of nine-digit ZIP codes on all claim submissions for all locations where an address is required. DMAS will need this information only if the payment is based on the location of the Rendering (Servicing) Provider. Please refer to the Provider Manuals and Electronic Data Interchange (EDI) Companion Guides for detailed electronic billing instructions:

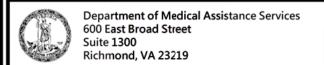
- n. Provider Manuals: http://www.dmas.virginia.gov/prm-provider_manuals.htm
- o. EDI Companion Guides: https://virginia.fhsc.com/hipaa/CompanionGuides.asp

DMAS will accept the Legacy Medicaid PIN only in very limited situations from providers who **do not** have an NPI (for example, because the provider has retired), **and** if the date(s) of service on the claim is prior to May 23, 2008. These situations will be researched and handled on an individual basis. In this situation, a claim or adjustment with a Legacy Medicaid PIN must be submitted on a paper claim form and mailed to:

Department of Medical Assistance Services

Manager, Payment Processing Unit, Division of Program Operations

600 E. Broad Street, Suite 1300



https://dmas.virginia.gov MEDICAID MEMO

Richmond, VA 23219-1856

GROUP BILLING

Group Practices must begin billing as groups no later than May 23, 2008.

Providers must submit the Group's organization Type-2 NPI as the Billing Provider and the practitioner's individual Type-1 NPI as the Rendering (Servicing) Provider on all claim submissions. Groups billing incorrectly will have their claims denied effective May 23, 2008.

Please note that a taxonomy code should never be sent for the Billing Provider when the billing provider is a Group Practice. If sent, the taxonomy code should be associated with the Rendering (Servicing) Provider. Sending a taxonomy code for a Group Practice provider on an electronic claim will result in rejection of the claim(s).

ELECTRONIC FUNDS TRANSFER (EFT)

Providers, who desire to have their payments directly deposited into their bank account, should go to the DMAS website at http://www.dmas.virginia.gov/SEARCH.ASP, then enter EFT in the field labeled "Title," then select the Search button. Download and complete the EFT Participation Agreement and submit the completed form to First Health PEU. Please contact the First Health PEU at (888) 829-5373 (toll free) if you have any questions or concerns related to EFT.

MEDICARE CROSSOVER CLAIMS

Medicare Crossover claims processed with NPIs that are not enrolled with DMAS will be denied effective May 23, 2008. In order for Medicare Crossover Claims to be paid, NPIs used on claims submitted to Medicare must be enrolled with DMAS. Currently, DMAS



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links the Medicare PIN (Vendor) to our Legacy Medicaid PINs through a crosswalk in order to process certain Medicare Crossover claims. **DMAS will no longer be able to perform this crosswalk effective May 23, 2008.** Providers that currently have units, departments, or locations that are enrolled with Medicare, but are not currently enrolled with DMAS will need to enroll those NPIs with DMAS as Medicare Crossover-Only providers.

DMAS cannot control when a claim crosses over from Medicare. Providers are strongly encouraged to coordinate this transition with billers and Clearinghouses to ensure no disruption in cash flow on claims crossed over from Medicare.

Providers that need to enroll as Medicare Crossover Only providers should go to the DMAS Provider Enrollment web page http://www.dmas.virginia.gov/search.asp?Userid=2&type=8 to obtain the Medicare Crossover Qualified Medicare Beneficiary (QMB) provider enrollment form.

PHARMACY

A Medicaid Memorandum with the specific pharmacy claims-processing guidelines for pharmacy and prescribing providers will be released soon. Please note that pharmacy providers are responsible for obtaining and submitting prescribers' NPIs when processing pharmacy claims. We urge pharmacy providers to immediately begin using their Provider NPIs, and the Prescriber's NPI on all DMAS pharmacy claims.

There are several resources available to identify the appropriate NPI for prescribers:

n. **CMS/ NPPES Registry** - https://nppes.cms.hhs.gov/NPPES/ (searchable database) OR https://nppesdata.cms.hhs.gov/ (to download file)



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n. DMAS Prescriber Identification List -

http://www.dmas.virginia.gov/pr- provider_no.asp?redir=prprescriber id list.htm

In addition, prescribers may assist by clearly writing or printing their NPI on prescriptions. Please contact the First Health Clinical Call Center at (800) 932-6648 for questions related to the use of NPI in pharmacy claims processing.

PRIOR AUTHORIZATIONS

Providers do not need to take action on existing Prior Authorizations (PAs) when service dates begin prior to May 23, 2008 and contain Legacy Medicaid PINs, even when the NPI/API is being submitted on the claim. If a PA was obtained with a Legacy Medicaid PIN that spans over May 23, 2008, the claims must be billed using the NPI for claims received by DMAS on or after May 22, 2008. A crosswalk is in place to match claims submitted with an NPI to PAs obtained with a Legacy Medicaid PIN. If a PA is obtained with an NPI, the claims must be billed with the NPI regardless of the date of service or the date the claim is received by DMAS. If the PA begin date is on or after May 23, 2008, the provider must submit the PA request and claim using the NPI.

All PAs should be requested using the Rendering (Servicing) Provider's NPI. PAs should <u>not</u> be requested using the Group Practice's organization NPI; and claims will deny if it is obtained with a Group NPI.

Please contact KePRO at (804) 622-8900 (Richmond area) or (888) 827-2884 (Toll-free), if you have questions.

ADVANCE PAYMENT REQUEST

DMAS will <u>not</u> issue advance payments to providers who have not:



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- n. obtained an NPI
- o. shared the NPI with DMAS
- p. implemented changes in order to bill using their NPI
- g. billed correctly using their NPI

DMAS will issue advance payments only as a result of DMAS systems issues that result in incorrect or non-payment of claims.

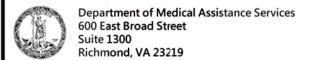
CLAIMS STATUS INFORMATION

Effective May 23, 2008, the web-based Automated Response System (ARS), MediCall, and the EDI Batch 276/277 must be accessed using your NPI/API. Claims status information requested using the NPI will return all claims that match the request criteria on the response, including claims submitted with the NPI and claims submitted with the Legacy Medicaid PIN.

NEGATIVE BALANCES

DMAS has identified outstanding provider negative balances associated with Legacy Medicaid PINs that have not yet been transferred to newly assigned NPI and/or APIs in DMAS' claims system. DMAS will automatically transfer all outstanding negative balances from Legacy Medicaid PINs to your NPI/API effective May 23, 2008. If you have questions about your negative balances, you can contact the Provider Helpline at (800) 552-8627.

■NPI TRAINING AND EDUCATION



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EDMAS is conducting Web-based Q&A sessions on topics associated with NPI including group billing, taxonomy, claim forms (UB-04 and CMS-1500), ARS, and other NPI-related topics. Visit the DMAS Learning Network at http://www.dmas.virginia.gov/LN-upcoming_events.htm for additional details about the new "WebEx" Web-based training as well as other DMAS training opportunities.

DMAS has a comprehensive NPI section on the DMAS website. Visit http://www.dmas.virginia.gov/npi-home_page.htm often for answers to frequently asked questions and NPI-related updates.

CONTACT INFORMATION

DMAS Provider Helpline: (804) 786-6273 Richmond area and Outside Virginia

(800) 552-8627 In-state, toll-free

<u>EDI</u>

First Health EDI Help (800) 924-6741

Desk

Prior Authorizations

KePRO (804) 622-8900 Richmond area

(888) 827-2884 Toll-free

Provider Enrollment First

Health PEU (888) 829-5373 Toll Free (In-state and Outside

Virginia)

Should you encounter problems using the NPI, the following resources will be available to assist you: Claims Status, Recipient Eligibility, MediCall

Point of Sale Inquiries and Pharmacy Prior Authorizations

First Health Clinical Call Center (800) 932-6648

Automated Response System (ARS)

First Health Services Web Support Call (800) 241-8726

Center

<u>Dental Providers</u> (888) 912-3456